Mark Blaine Amerman April 07, 2022

Page 85 Page 86 1 handling of injured. 1 subject requires more that on-scene medical attention, 2 an attempt will be made to have a separate officer A Okay. 3 Q You see the two bold paragraphs at the 3 take them to the nearest medical facility versus 4 bottom? 4 officers have the affirmative duty. A Ido. The language is different. It seems like 6 Q First two sentences state, officers have an 6 the message is the same. That could have been the 7 affirmative duty to care for persons in their custody 7 same thing when the law changed about duty to 8 and that officers are responsible for providing or 8 intervene. Maybe they changed to make that language 9 obtaining appropriate medical attention to any person 9 stronger. 10 in their custody who is injured. Q So you are not sure the reason for the 11 Do you see that? 11 change? 12 A I do. A No. I'm assuming. I don't recall. The 13 Q Why is this language added to the 2021 13 accreditation manager would have it in her notes 14 policy? 14 probably. 15 A I don't think that's new. 15 Q Okay. 16 Q Feel free to take a look at it. A Because when we get reviewed, they want 17 A Is that what -- you are saying that's a new 17 to -- probably want to know why we changed. Whether 18 statement? 18 it was through the law change or best practices change 19 Q Yes. Feel free to take a look at Exhibit 19 amongst the organization, if that's what made the 20 14. 20 change happen. Me reading it, it's the same message. 21 A Handling of injured. Officers whose actions 21 You hurt, you have a duty to care for people. 22 have resulted in or alleged to have resulted in injury 22 Q What is an affirmative duty? 23 or death of another person are required, after 23 A To my vernacular it's a shall not a should. 24 securing the person, to provide medical aid if Q And is that different from the earlier 25 necessary and will photograph the injuries. If a 25 policy? Does it mention affirmative duty? Page 87 Page 88 1 A The way I interpret it, it's a shall not a A Having never had an incident of it, the way 2 they were able to articulate it and talk about agonal 2 should. 3 breathing definitely made us more aware. So the 3 Q Okay. Let's take a look at the second bold 4 paragraph. Second sentence in that paragraph states 4 common practice was don't hog tie. This wasn't a 5 officers restraining a subject shall be cognizant of 5 non-common practice in this situation trying to 6 and avoid positional asphyxia. This department 6 control somebody who's been combative for so long and 7 prohibits face down, prone restraint. The officer 7 somewhat appeared to be under the influence of 8 should properly restrain the subject and place the 8 something, it wouldn't be unreasonable to attempt to 9 subject in an upright position sitting or standing or 9 restrain them down while they waited on medical 10 side laying position. 10 assistance. Having learned lessons thereafter, i.e. 11 Do you see that? 11 the policy change, we should attempt to put them in 12 A Yep. 12 what we call recovery position as outlined in what the 13 policy you just read. Sitting or on their side 13 Q Okay. 14 A That language stemmed from our training that 14 position which would help breathing. 15 I spoke about earlier, the ACCG. Q This policy amendment in Exhibit 15 was May 16 Q So prone restraint, what were you taught 16 2021. When was the ACCG training that you received? 17 about prone restraint? A I don't recall when it came out. I do --18 MR. WILLIAMS: Object to form. 18 what I do recall about it - like I said earlier - it 19 A Now or --19 was around the George Floyd case that was still very 20 Q ACCG's training that you referenced. 20 active when this training came out. 21 A That it could cause positional asphyxia. Q Do you know if the training was in 2021? 22 People could have difficulty breathing in that A Trying to recall I'd say yes. But I can't 23 position made us aware of that. 23 tell you for sure. 24 Q And you didn't know that before ACCG's Q Could it have been 2020? 25 training? 25 A It could be. I really don't -- I just -- I

Mark Blaine Amerman April 07, 2022

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Page 89

1 do recall the training. I do recall it was around the

2 George Floyd time. I do recall it made an impression

3 on me and I told training and accreditation I want 4 this in policy. I want our people trained on it. Get

5 this information out. That I recall. That training

6 made an impression on me.

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Q Could it have been --

A It was something I'd never gotten before.

9 Q Could it have been 2019?

10 A No, I think that was too long ago. I think 11 it's more recent.

12 Q So prior to this change in the policy, were 13 your officers taught anything about the prone 14 position?

A Not that I know of.

Q And I think we may have covered this but were they taught anything about positional asphyxia?

A Prior?

19 Q Prior to this change in policy.

A No, not that I'm aware of.

Q If this policy, Exhibit 15, had been in place before the arrest of Mr. Rodriguez, would the policy have been violated?

24 MR. WILLIAMS: Object to form.

A I would want to look at -- I'm sure

everybody as far as training and all actually look at all of the tapes before coming to a conclusion. From what I seen, I would have liked him to have been in a better recovery position. To answer your question, yes, quite possibly.

Page 90

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But I would want to see all the tapes and see how long he was in the prone. See about the recovery position. Ideally I wish somebody — it's unfortunate what happened. And it's — it's an unfortunate incident that we learn from to do it better in the future. And I think between our case or George Floyd's case or all these different cases, we are learning from this and that's why training is coming out from groups like ACCG and others that do this.

I don't want to give you -- I don't know if I'm able to give you -- just say yes or no would they have been in violation of this policy. To go back and -- how long -- I know from what I saw in the tape he showed me a little while ago, you know, the screaming and the kicking, the still moving and we talk about the recovery position. As soon as it's safe and practical. Would it have been practical to have him sitting up if he's still kicking and screaming and you're waiting on the ambulance to come,

Page 91

1 I don't -- I don't know. I'd want to see more.

2 From what -- in an attempt to answer your 3 question this is the current policy now. What they

did back then would I take issue with what they did

5 back then, yeah, I wish they would have done

something -- with this current policy, I wish they

would have done something better or differently as far as having him in a recovery position quicker. Does

that a little bit answer your question?

10 Q Well I heard -- I think I heard a yes, it 11 violated policy and then some clarification. I'm not 12 sure about the clarification.

MR. WILLIAMS: He didn't like the clarification in other words. Explain -- it's speculation anyway. Subject to that you can try to explain more.

17 A Question, would it be a policy violation.
18 With the current policy now, would it have been a
19 policy violation back then; correct? That's the
20 question?

Q Um-hmm.

22 A Based on just what I saw, it would have 23 required me to investigate further. I'll say that. 24 Would -- why wasn't he in the recovery position. 25 What -- what did you have going on where you felt like

1 he couldn't be in a sitting, standing or side 2 position. You need to explain that to me.

3 I would want somebody in that position as quickly as possible. As soon as you have control of 4 5 them, they need to be in the recovery position. That goes for whether they are having difficulty or not in 6 my opinion. So it would definitely -- face value, 7 yes. Something -- this isn't what policy says we're 8 9 supposed to do. Now you -- now I want to know why we didn't follow policy. Why wasn't he in there. So the 10 answer to your question, yes, that would be a policy 11 violation. I would inquire further why didn't do you 13 that.

Because there's a reason — as soon as it's practical and safe, you are supposed to do that. What made you feel that you weren't practical and safe to do that. Current policy now compared to what they did then. So yes, to answer your question, yes, it would be a policy violation.

Q Okay. As far as medical treatment goes, prior to Mr. Rodriguez's arrest what were your officers taught about medical treatment when people are in custody?

A You have to clarify. I'm not tracking.

Q If someone is in one of your officer's

Mark Blaine Amerman April 07, 2022

Page 94 Page 93 custody --I think they have to provide medical 1 have to defer to departmental training officer but 2 Α Okay. 2 3 -- and they are -- there is some medical 3 some level of care, help, calling for an ambulance. issues going on with that detainee or arrestee, what 4 You know, open wounds, bleeding, attempt to stop the 5 are your officers trained to do? 5 bleeding. Using the defibrillator, CPR, giving 6 MR. WILLIAMS: Object to the form. I assume Narcan. I give out a lot of life saving awards. They 6 7 you are talking about inmates injured and the 7 do a pretty good job of giving care. 8 officer sees that an inmate or suspect is 8 In this case did the officers provide any 9 9 medical treatment? injured? 10 10 Other than -- from the video that I saw, it Α Call an ambulance. 11 appears -- I believe it was Phillips who first notices Is that the only thing? 11 12 No. They also are trained on how to use the 12 that it appears that Mr. Rodriguez is having an issue 13 AED and CPR and some basic first aid. And some of my 13 breathing. And they are assessing. And I know the 14 employees are actually paramedics. So it goes from 14 ambulance is coming. And it appears their concern is 15 Band-Aid to a paramedic. 15 heightened as the ambulance is coming. And they are 16 Q What's the AD? 16 still assessing. 17 17 Α AED, the defibrillator. And it's almost simultaneously when the 18 Is that if the heart stops? 18 ambulance shows up and they are like hey, I think he's 19 having serious difficulty breathing. Like at that Yes. You hook them up and shock them. 19 Α 20 They are all trained on that? 20 same point. From my experience if the ambulance 21 Α The ones that have them, yes. 21 wasn't there, the officers would have took action as 22 Q And CPR? 22 far as CPR or AED, doing something of that nature. 23 Α Majority -- definitely AED's. 23 Usually when the ambulance is there, they are the pros that handle that. 24 0 Were they ever trained that they had to give 24 medical treatment to someone in their custody? 25 Did medical treatment of Mr. Rodriquez Page 95 Page 96 comport with departmental policies? REDTRECT-EXAMINATION 1 1 2 MR. WILLIAMS: Object to form. Go ahead. 2 BY MR. WILLIAMS: 3 From what I saw, yes. They -- I'll say the 3 There was a good bit of discussion about the ambulance was called at least 10 minutes before any recommendations of ACCG, maybe other sources that 4 5 indication of something else was wrong. And then I 5 occurred after some period of time and apparently believe they checked on -- at least the video I saw after this incident regarding warnings of positional 6 7 hey, when are you coming, when are you coming. Hurry 7 asphyxia. 8 8 up. They wanted them there. But he was still yelling Do you even know if there is a medical or a 9 and kicking. And I don't think -- didn't appear to be 9 technical basis for determining whether there is a any concern about breathing at that point. Not until danger of somebody suffering positional asphyxia just 10 10 from being in the prone position, restrained in the 11 really when the ambulance showed up. 11 12 Your officers, are they individually covered prone position? 13 by any liability insurance? 13 Α 14 Not that I'm familiar with. 14 So the adoption of a warning about the Α 15 ACCG --15 possibility of positional asphyxia, is that just an Q 16 16 attempt to employ the best practices to avoid Α Individually? 17 0 Um-hmm. 17 potential problems? 18 Oh absolutely. When your insurance company Α I have to consult with my attorney. I don't 18 19 have --19 calls you and say don't do this, if we can fit it into 20 20 best practices, we will do that. I was just curious. 0

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years, 27 years?

34 years.

34 years total?

Just 28 at Henry.

I don't know.

follow-up questions real quickly.

MR. JOHNSON: Okay. That's all I have.

MR. WILLIAMS: I just have a couple of

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For -- you've been policing for about 28